

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000000955

FILED
May 02, 2003
Secretary of State

Entity Name: WORLD HARVEST COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

2276 N US 1
FT PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

2276 N US 1
FT PIERCE, FL 34946

New Mailing Address:

FEI Number: 65-0717990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GASKIN, MARJORIE
2010 AVENUE O
FORT PIERCE, FL 34950

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TOMMIE, WANDA
Address: 3305 MEADOW LN
City-St-Zip: FT PIERCE, FL 34950

Title: DS () Delete
Name: GASKIN, MARJORIE B
Address: 2010 AVENUE O
City-St-Zip: FT PIERCE, FL 34950

Title: DT () Delete
Name: MORRIS, JOHNNNA S
Address: 2007 AVENUE O
City-St-Zip: FT PIERCE, FL 34950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: TOMMIE, WANDA
Address: 4280 FAVORITE ROAD
City-St-Zip: FT PIERCE, FL 34981

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: MORRIS, JOHNNNA S
Address: 588 NW WAVERLY CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARJORIE B. GASKIN

SD

05/02/2003

Electronic Signature of Signing Officer or Director

Date